

**Welsh Housing Authority**

# **2012 Annual Plan**

**2012 – 2016 Version 01**

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Welsh Housing Authority</u> PHA Code: <u>LA039</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>6/2012</u>					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>36</u> Number of HCV units: <u>0</u>					
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
	PHA 1:				PH	HCV
	PHA 2:					
	PHA 3:					
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <i>The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</i>					
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. 1) <i>To provide the community with safe and affordable housing.</i> 2) <i>The Welsh Housing Authority as administrator of a federal funded housing program – shall protect victims of criminal, domestic violence, sexual assault, or stalking, as well as members of the victims' family – from losing their HUD assisted housing as a result of the aforementioned crime committed against them.</i> <i>The Welsh Housing Authority's Administrative Plan covers denial of admission to the program and termination of continued participation relative to the Violence Against Women Act and serves as protection of such abuse.</i>					
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <u>N/A</u> (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. <u>Main administrative office of the PHA</u>					
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b>					
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable. <u>Please see pages 4 - 5</u>					
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. <u>Please see pages 6 - 19</u>					
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <u>Please see pages 20 - 24</u>					

8.3	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	<b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.
9.1	<b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b>
10.0	<b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested. <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.  <i>The Welsh Housing Authority continues to work on the goals described in the 2012 PHA Plan by updating and rehabbing units and keeping the units, safe and sanitary.</i></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>a. Substantial Deviation from the 5-Year Plan</p> <ul style="list-style-type: none"> <li>✓ <i>Any change to Mission Statement such as:</i></li> <li>✓ <i>50% deletion from or addition to the goals and objectives as a whole.</i></li> <li>✓ <i>50% or more decrease in the quantifiable measurement of any individual goal or objective</i></li> </ul> <p>b. Significant Amendment or Modification to the Annual Plan</p> <ul style="list-style-type: none"> <li>✓ <i>50% variance in the funds projected in the Capital Fund Program Annual Statement</i></li> <li>✓ <i>Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement</i></li> <li>✓ <i>Any change in a policy or procedure that requires a regulatory 30-day posting</i></li> <li>✓ <i>Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs</i></li> <li>✓ <i>Any change inconsistent with the local, approved Consolidated Plan</i></li> </ul>
11.0	<b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office. <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements <i>There were no challenged elements</i></p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

## 8.0 CAPITAL IMPROVEMENTS

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U. S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 3/31/2014

<b>Part I: Summary</b>					
<b>PHA Name:</b> <i>Welsh Housing Authority</i>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P039501-12</i> Replacement Housing Factor Grant No: Date of CFFP: 			<b>FFY Grant:</b> <i>2012</i> <b>FFY of Grant Approval:</b> 
<b>Type of Grant</b> <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs <sup>2</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds (0100 Reserved Budget)				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 43,856.00			
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 43,856.00	\$ -	\$ -	\$ -
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director  <i>Carolyn B...</i>		Date  5/18/2012		Signature of Public Housing Manager  	
				Date  	

<sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>4</sup> RHF funds shall be included here

PHA Name:	Grant Type and Number	Federal FFY of Grant:
<i>Welsh Housing Authority</i>	Capital Fund Program Grant No: <i>LA48P039501-12</i>	<i>2012</i>
	CFFP (Yes / No):	
	Replacement Housing Factor Grant No:	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>2</sup> To be completed for the Performance and Evaluation Report

## 8.1 CAPITAL FUND PROGRAM ANNUAL STATEMENT/PERFORMANCE AND EVALUATION REPORT [2011, 2010, 2009, 2009 ARRA, 2008, 2007 & 2006](#)

Annual Statement/Performance and Evaluation Report

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

## Capital Fund Financing Program

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

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Expires 3/31/2014

<b>Part I: Summary</b>		<b>PHA Name:</b>		<b>Grant Type and Number</b>		<b>FFY Grant:</b>	
Welsh Housing Authority				Capital Fund Program Grant No: LA48P039501-11		2011	
				Replacement Housing Factor Grant No:		FFY of Grant Approval:	
				Date of CFFP:			
<b>Type of Grant</b>							
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )							
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report							
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Costs</b>			
		<b>Original</b>	<b>Revised</b>	<b>Obligated</b>	<b>Expended</b>		
1	Total non-CFP Funds (0100 Reserved Budget)						
2	1406 Operations (may not exceed 20% of line 21)						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	\$ 7,000.00		\$ 7,000.00	\$ -		
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	\$ 41,470.00		\$ 23,000.00	\$ -		
11	1465.1 Dwelling Equipment - Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities						
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 48,470.00	\$ -	\$ 30,000.00	\$ -		
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Manager</b>		<b>Date</b>	
Carolyn B...		5/18/2012					

<sup>1</sup> To be completed for the Performance and Evaluation Report

2 To be completed for the Performance and Evaluation Report or a Revised Annual Statement

3 PHAs with under 250 units in management may use 100% of CFP Grants for Operations

4 RHF funds shall be included here

Part II: Supporting Pages								
PHA Name:		Grant Type and Number				Federal FFY of Grant:		
<i>Welsh Housing Authority</i>		Capital Fund Program Grant No: <i>LA48P039501-11</i> CFFP (Yes / No): Replacement Housing Factor Grant No:				<i>2011</i>		
Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Qty.	Total Estimated Costs		Total Actual Costs		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<i>PHA Wide</i>	<i>A/E Fees &amp; Costs</i>	<i>1430</i>		\$ 7,000.00		\$ 7,000.00	\$ -	<i>In Process</i>
<i>LA039-001</i>	<i>Replace A/C Units</i>	<i>1460</i>		\$ 34,470.00		\$ 16,000.00	\$ -	<i>In Process</i>
<i>LA039-001</i>	<i>Foundation Repairs</i>	<i>1460</i>		\$ 7,000.00		\$ 7,000.00	\$ -	<i>In Process</i>
				\$ 48,470.00	\$ -	\$ 30,000.00	\$ -	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>2</sup> To be completed for the Performance and Evaluation Report


**Part I: Summary**

<b>PHA Name:</b> <div style="background-color: #cccccc; padding: 2px; text-align: center;">Welsh Housing Authority</div>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <div style="background-color: #cccccc; padding: 2px;">LA48P039501-10</div> Replacement Housing Factor Grant No: <div style="background-color: #cccccc; padding: 2px;"></div> Date of CFFP: <div style="background-color: #cccccc; padding: 2px;"></div>	<b>FFY Grant:</b> <div style="background-color: #cccccc; padding: 2px; text-align: center;">2010</div> <b>FFY of Grant Approval:</b> <div style="background-color: #cccccc; padding: 2px;"></div>
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**Type of Grant**

<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disaster/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no: <div style="background-color: #cccccc; padding: 2px;"></div> )
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <div style="background-color: #cccccc; padding: 2px;">12/31/2011</div>	<input type="checkbox"/> Final Performance and Evaluation Report	

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs <sup>2</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 56,375.00		\$ -	\$ -
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 56,375.00	\$ -	\$ -	\$ -
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<b>Signature of Executive Director</b> <div style="text-align: center;">   <div style="background-color: #cccccc; padding: 2px; display: inline-block;">5/18/2012</div> </div>	<b>Signature of Public Housing Manager</b> <div style="text-align: center;"> <div style="background-color: #cccccc; padding: 2px; display: inline-block;"></div> </div>
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



PHA Name:	Grant Type and Number	Federal FFY of Grant:
Welsh Housing Authority	Capital Fund Program Grant No: LA48P039501-10	2010
	CFFP (Yes / No):	
	Replacement Housing Factor Grant No:	

<sup>2</sup> To be completed for the Performance and Evaluation Report


**Part I: Summary**

<b>PHA Name:</b>  <i>Welsh Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P039501-09</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2009</i> <b>FFY of Grant Approval:</b>
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**Type of Grant**

☐ Original Annual Statement    
 ☐ Reserve for Disaster/Emergencies    
 ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: *12/31/2011*    
 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs <sup>2</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 7,204.00		\$ 7,204.00	\$ 7,204.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 49,704.00		\$ 49,704.00	\$ 49,704.00
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 56,908.00	\$ -	\$ 56,908.00	\$ 56,908.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<b>Signature of Executive Director</b>  <div style="text-align: right;">5/18/2012</div>	<b>Signature of Public Housing Manager</b>   <div style="text-align: right;"><b>Date</b></div>
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here

PHA Name:		Grant Type and Number				Federal FFY of Grant:		
<i>Welsh Housing Authority</i>		Capital Fund Program Grant No: <i>LA48P039501-09</i>						
		CFFP (Yes / No):						
		Replacement Housing Factor Grant No:						
Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Qty.	Total Estimated Costs		Total Actual Costs		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<i>PHA Wide</i>	<i>A/E Fees &amp; Costs</i>	<i>1430</i>		\$ 7,204.00		\$ 7,204.00	\$ 7,204.00	<i>Complete</i>
<i>PHA Wide</i>	<i>Install A/C Units</i>	<i>1460</i>	<i>11</i>	\$ 49,704.00		\$ 49,704.00	\$ 49,704.00	<i>Complete</i>
				\$ 56,908.00	\$ -	\$ 56,908.00	\$ 56,908.00	

<sup>2</sup> To be completed for the Performance and Evaluation Report


**Part I: Summary**

<b>PHA Name:</b>  <i>Welsh Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P039501-08</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2008</i> <b>FFY of Grant Approval:</b>
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**Type of Grant**

- ☐ Original Annual Statement     
 ☐ Reserve for Disaster/Emergencies     
 ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: *12/31/2011*     
 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs <sup>2</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 5,396.00		\$ 5,396.00	\$ 5,396.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 48,568.00		\$ 48,568.00	\$ 48,568.00
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 53,964.00	\$ -	\$ 53,964.00	\$ 53,964.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<b>Signature of Executive Director</b>   <b>Date</b> <i>5/18/2012</i>	<b>Signature of Public Housing Manager</b>   <b>Date</b>
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<sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations

<sup>4</sup> RHF funds shall be included here

Part II: Supporting Pages								
PHA Name:		Grant Type and Number				Federal FFY of Grant:		
Welsh Housing Authority		Capital Fund Program Grant No: LA48P039501-08				2008		
		CFFP (Yes / No):						
		Replacement Housing Factor Grant No:						
Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Qty	Total Estimated Costs		Total Actual Costs		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	A/E Fees & Costs	1430		\$ 5,396.00		\$ 5,396.00	\$ 5,396.00	Complete
LA039-001	Provide insulation in attics	1460	3 Units	\$ 14,964.00		\$ 14,964.00	\$ 14,964.00	Complete
LA039-001, 002	Plumbing	1460	7 Units	\$ 8,000.00		\$ 8,000.00	\$ 8,000.00	Complete
LA039-001, 002	Lavatory Replacement	1460	36	\$ 25,604.00		\$ 25,604.00	\$ 25,604.00	Complete
				\$ 53,964.00	\$ -	\$ 53,964.00	\$ 53,964.00	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>2</sup> To be completed for the Performance and Evaluation Report

**Part I: Summary**

<b>PHA Name:</b>  <div style="background-color: #e0e0e0; padding: 2px; text-align: center;"> <i>Welsh Housing Authority</i> </div>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <span style="background-color: #e0e0e0; padding: 2px;">LA48P039501-07</span> Replacement Housing Factor Grant No: <span style="background-color: #e0e0e0; padding: 2px;"></span> Date of CFFP: <span style="background-color: #e0e0e0; padding: 2px;"></span>	<b>FFY Grant:</b> <span style="background-color: #e0e0e0; padding: 2px;">2007</span> <b>FFY of Grant Approval:</b> <span style="background-color: #e0e0e0; padding: 2px;"></span>
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**Type of Grant**

- ☐ Original Annual Statement     
 ☐ Reserve for Disaster/Emergencies     
 ☐ Revised Annual Statement (revision no:    )  
☒ Performance and Evaluation Report for Period Ending: 12/31/2011     
 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs <sup>2</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements	\$ 10,818.00		\$ 10,818.00	\$ 10,818.00
4	1410 Administration (may not exceed 10% of line 21)	\$ 5,409.00		\$ 5,409.00	\$ 5,409.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 37,865.00		\$ 37,865.00	\$ 37,865.00
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 54,092.00	\$ -	\$ 54,092.00	\$ 54,092.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<b>Signature of Executive Director</b>  <div style="text-align: center;">   <span style="font-size: 1.2em;">5/18/2012</span> </div>	<b>Signature of Public Housing Manager</b>  <div style="text-align: center;"> <span style="font-size: 1.2em;"> </span> </div>
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here

[illegible]

<sup>2</sup> To be completed for the Performance and Evaluation Report


**Part I: Summary**

<b>PHA Name:</b>	<b>Grant Type and Number</b>	<b>FFY Grant:</b>
<i>Welsh Housing Authority</i>	Capital Fund Program Grant No: <i>LA48P039501-06</i> Replacement Housing Factor Grant No: Date of CFFP:	<i>2006</i> <b>FFY of Grant Approval:</b>

**Type of Grant**

☐ Original Annual Statement    
 ☐ Reserve for Disaster/Emergencies    
 ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: *12/31/2011*    
 ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs <sup>2</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements	\$ 306.00		\$ 306.00	\$ 306.00
4	1410 Administration (may not exceed 10% of line 21)	\$ 153.00		\$ 153.00	\$ 153.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 10,000.00		\$ 10,000.00	\$ 10,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 41,864.00		\$ 41,864.00	\$ 41,864.00
10	1460 Dwelling Structures	\$ 1,073.00		\$ 1,073.00	\$ 1,073.00
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 53,396.00	\$ -	\$ 53,396.00	\$ 53,396.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<b>Signature of Executive Director</b>   <b>Date</b> 5/18/2012	<b>Signature of Public Housing Manager</b>   <b>Date</b>
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



PHA Name:		Grant Type and Number						Federal FFY of Grant:	
<div>Welsh Housing Authority</div>		Capital Fund Program Grant No: <div>LA48P039501-06</div> CFFP (Yes / No): <div></div> Replacement Housing Factor Grant No: <div></div>						<div>2006</div>	
Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Qty.	Total Estimated Costs		Total Actual Costs		Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
PHA Wide	Management Improvements	1408		\$ 306.00		\$ 306.00	\$ 306.00	Complete	
PHA Wide	Administration	1410		\$ 153.00		\$ 153.00	\$ 153.00	Complete	
PHA Wide	A/E Fees & Costs	1430		\$ 10,000.00		\$ 10,000.00	\$ 10,000.00	Complete	
LA039-001	Repair & Replace Sidewalks	1450		\$ 20,932.00		\$ 20,932.00	\$ 20,932.00	Complete	
LA039-002	Repair & Replace Parking Pads	1450		\$ 20,932.00		\$ 20,932.00	\$ 20,932.00	Complete	
LA039-001, 002	Cabinet Work	1460		\$ 1,073.00		\$ 1,073.00	\$ 1,073.00	Complete	
				\$ 53,396.00		\$ 53,396.00	\$ 53,396.00		

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form HUD 50075 .2(4/2008)

# Capital Fund Program - Five-Year Action Plan

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

Expires 4/30/2011

<b>Part I: Summary</b>						
PHA Name/Number <i>Welsh Housing Authority</i>		Locality (City/Couty & State) <i>Jefferson Davis Parish</i>		<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b>		<input type="checkbox"/> <b>Revision No:</b>
A.	Development Number and Name	Work Statement for Year 1 FFY <i>2012</i>	Work Statement for Year 2 FFY <i>2013</i>	Work Statement for Year 3 FFY <i>2014</i>	Work Statement for Year 4 FFY <i>2015</i>	Work Statement for Year 5 FFY <i>2016</i>
B.	Physical Improvements Subtotal		\$ <i>43,856.00</i>	\$ <i>11,948.00</i>	\$ <i>26,315.00</i>	\$ <i>26,315.00</i>
C.	Management Improvements		\$ -	\$ <i>3,000.00</i>	\$ -	\$ -
D.	PHA - Wide Non-dwelling Structure and Equipment		\$ -	\$ <i>8,908.00</i>	\$ -	\$ -
E.	Administration					
F.	Other		\$ -	\$ <i>20,000.00</i>	\$ <i>17,541.00</i>	\$ <i>17,541.00</i>
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds		\$ <i>43,856.00</i>	\$ <i>43,856.00</i>	\$ <i>43,856.00</i>	\$ <i>43,856.00</i>
L.	Total Non-CFP Funds					
M.	Grand Total		\$ <i>43,856.00</i>	\$ <i>43,856.00</i>	\$ <i>43,856.00</i>	\$ <i>43,856.00</i>

# Capital Fund Program - Five-Year Action Plan

U. S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY  <i>2012</i>	Work Statement for Year <i>2013</i> FFY <i>2013</i>			Work Statement for Year <i>2014</i> FFY <i>2014</i>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
	<i>Replace kitchen counter tops</i>	<i>22</i>	<i>\$ 22,000.00</i>	<i>Trees</i>		<i>\$ 20,000.00</i>
	<i>Replace lavatory sinks</i>	<i>16</i>	<i>\$ 2,000.00</i>	<i>Remove bathroom windows and replace with brick</i>	<i>20</i>	<i>\$ 5,000.00</i>
	<i>Replace Doors</i>	<i>40</i>	<i>\$ 2,000.00</i>	<i>Put new tub liners</i>	<i>20</i>	<i>\$ 6,948.00</i>
	<i>Foundation Repair</i>	<i>20</i>	<i>\$ 17,856.00</i>			
	Subtotal of Estimated Cost		<i>\$ 43,856.00</i>	Subtotal of Estimated Cost		<i>\$ 31,948.00</i>

# Capital Fund Program - Five-Year Action Plan

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

Expires 4/30/2011

Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY  <b>2012</b>	Work Statement for Year FFY <b>2015</b>			Work Statement for Year FFY <b>2016</b>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
	<i>Parking lot repairs</i>	<i>3</i>	<i>\$ 8,771.00</i>	<i>Parking lot repairs</i>	<i>3</i>	<i>\$ 8,771.00</i>
	<i>Sidewalk repairs</i>		<i>\$ 8,771.00</i>	<i>Sidewalk repairs</i>		<i>\$ 8,771.00</i>
	<i>Replace plumbing</i>	<i>6</i>	<i>\$ 8,771.00</i>	<i>Replace plumbing</i>	<i>6</i>	<i>\$ 8,771.00</i>
	<i>Power wash</i>		<i>\$ 8,771.00</i>	<i>Power wash</i>		<i>\$ 8,771.00</i>
	<i>Repair Roof</i>		<i>\$ 8,772.00</i>	<i>Repair Roof</i>		<i>\$ 8,772.00</i>
	Subtotal of Estimated Cost:		<b>\$ 43,856.00</b>	Subtotal of Estimated Cost:		<b>\$ 43,856.00</b>

## Capital Fund Program - Five-Year Action Plan

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

Expires 4/30/2011

### **Part III: Supporting Pages - Management Needs Work Statement(s)**

Work Statement for Year 1 FFY  <i>2012</i>	Work Statement for Year FFY <i>2013</i>			Work Statement for Year FFY <i>2014</i>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
				<i>New Computers</i>		\$ 3,000.00
				<i>New Dish Set</i>		\$ 8,908.00
	Subtotal of Estimated Cost:		\$ -	Subtotal of Estimated Cost:		\$ 11,908.00

## Capital Fund Program - Five-Year Action Plan

U. S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

### **Part III: Supporting Pages - Management Needs Work Statement(s)**

[illegible]

## **10 –A. Provide a statement of the Progress the PHA has made in meeting the mission and goals described in the last 5 Year Plan.**

*The Welsh Housing Authority continues to work on the goals described in the 2010 5-Yr Plan by updating and rehabbing units and keeping the units, safe and sanitary.*

## **10 -B. Criteria for Substantial Deviations and Significant Amendments**

24 CFR Part 903.7(r)

### **(1) Amendment and Deviation Definitions**

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### **a. Substantial Deviation from the 5-Year Plan**

- ✓ *Any change to Mission Statement such as:*
- ✓ *50% deletion from or addition to the goals and objectives as a whole.*
- ✓ *50% or more decrease in the quantifiable measurement of any individual goal or objective*

#### **b. Significant Amendment or Modification to the Annual Plan**

- ✓ *50% variance in the funds projected in the Capital Fund Program Annual Statement*
- ✓ *Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement*
- ✓ *Any change in a policy or procedure that requires a regulatory 30-day posting*
- ✓ *Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs*
- ✓ *Any change inconsistent with the local, approved Consolidated Plan*

## **D. Other Information Required by HUD**

Use this section to provide any additional information requested by HUD.

## **REQUIRED ATTACHMENT “A” *Community Service***

*In order to be eligible for continued occupancy, each adult family member must either (1) contribute to eight hours community service per month (not including political activities) within the community in which the public housing development is located or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement. The following adult members are exempt from this requirement: Family members who are 62 or older, family members who are blind or disabled, family members who are primary caregiver for someone who is blind or disabled, family members engaged in work activity, family members who are exempt from work activity under Part A Title IV of the Social Security Act or under any other state welfare program, including the welfare to work program, family members receiving assistance under a state program funded under Part A Title IV of the Social Security Act or under any other state welfare program, including welfare to work and who are in compliance with that program*

## **REQUIRED ATTACHMENT “B” *Violence against Women Act (VAWA)***

*The Welsh Housing Authority as administrator of a federal funded housing program – shall protect victims of criminal, domestic violence, sexual assault, or stalking, as well as members of the victims’ family – from losing their HUD assisted housing as a result of the aforementioned crime committed against them.*

*The Welsh Housing Authority’s Administrative Plan covers denial of admission to the program and termination of continued participation relative to the Violence against Women Act and serves as protection of such abuse.*

## **ATTACHMENT “C”: PET POLICY**

*All residents are permitted to own one common domesticated household pet such as, cat, dog, bird, fish, gerbil, hamster, guinea pig and fish. (The total number of birds that may be owned is two, and multiple fish may be owned.) Reptiles of any kind are prohibited except small turtles or lizards in a terrarium. Weight may not exceed 20 pounds and height shall not exceed 12 inches at full growth; service animals are not included in these limitations. Pets are to be licensed yearly with the City of Alpine and the owner must show proof of rabies and distemper booster inoculations. All cats and dogs must be spayed or neutered; cats must be de-clawed and must have proof from a veterinarian. No pet may be kept in violation of state, local health or humane laws or ordinances. Cats and dogs must be kept on a leash when out of the unit; birds must be confined to a cage at all times. No pet is permitted in the common areas, except to enter and exit the unit. Pets may not be left in the unit alone overnight. A scooper must be obtained to clean up feces when the pet is outdoors. Pet owners must do whatever is necessary to keep pets free from fleas and ticks. (The resident is responsible for flea and tick extermination. No vicious animals are permitted to be kept on the property. No pet shall disturb, interfere or diminish the peaceful enjoyment of other residents. Cat owners must feed their cats at least once a day, provide a litter box in the unit and clean it at least every two days and take the animal to the veterinarian annually. The litter box may not become unsanitary or unsightly and shall dispose of refuse in a plastic tie sack in a designated trash container outside. Dogs must be feed daily and walked twice per day, remove droppings twice per day and take them to the veterinarian annually. Each pet owner must pay a nonrefundable \$100.00 deposit, and a refundable \$100.00 deposit or a \$50.00 deposit on aquariums.*



# Certification of Payments to Influence Federal Transactions

U. S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

Applicant Name

*Welsh Housing Authority*

Program/Activity Receiving Federal Grant Funding

*2012 Capital Fund Program*

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No federal appropriated funds have been paid or will be paid, by or on behalf of the , to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form- LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, and U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000.00 and not more than \$100,000.00 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Title

*CAROLYN BEAVERS**EXECUTIVE Director*

Signature

Date (mm/dd/yyyy)

*Carolyn**5/18/2012*

**Civil Rights Certification**

U. S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
**Expires 04/30/2011**

**Civil Rights Certification  
Annual Certification and Board Resolution**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof.*

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Welsh Housing Authority

PHA Name

LA039

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U. S. C. 1001, 1010, 1012; 31 U. S. C. 3729, 3802)

Name of Authorized Official

Title

**William Davis**

**Chair**

Signature

Date



**May 25, 2012**